U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. 112133.00002 ORD Attorn y D cket Number **DECLARATION FOR UTILITY OR** Paul R. Sanberg et al. **First Named Inventor DESIGN COMPLETE IF KNOWN PATENT APPLICATION** (37 CFR 1.63) 10/621,061 **Application Number** 07-16-2003 Filing Date Declaration Submitted after Initial Declaration Submitted Art Unit 1614 Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing t.b.d. required) **Examiner Name**

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I hereby declare the	at:						
Each inventor's resid	dence, mailing	address, and ci	tizenship are as	stated below ne	xt to their name.		
I believe the inventor patent is sought on t			ginal and first in	ventor(s) of the s	subject matter wh	nich is claimed and	d for which a
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Additional forcin	n application	numbers are list	ed on a supplem	nontal priority 4-1	to about PTO/CD	/02B attached her	roto:

DECLARATION — Utility or Design Patent Application

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Direct all correspondence to:	Customer Nui	mber	26707		OR		Correspondence address below		
Name									
Address									
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Country		Telephor	one				Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INV	ZENTOR:	<u> </u>		A petition	n has t	been fil	led for this unsigned inventor		
Given Name Paul R. (first and middle [if any])	1			Family Na or Surnan		ınberg	Activities of the second secon		
Inventor's Signature	4						Oate 9(29/03		
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Inventor's Signature							9129\03 Date		
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Malling Address									
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Additional inventors are being named on the One supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.									

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ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if	-	A petition has been filed for this unsigned inventor							
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Inventor's Signature		Date							
Residence: City State			Country			Citizenship			
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Name of Additional Joint Inventor, if any:									
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature				Date					
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